

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|--------|
| FEE DETERMINATION | CH | 4100 | 7/3/00 |
| O.I.P.E. CLASSIFIER | CH | 4112 | 7/3/00 |
| FORMALITY REVIEW | CH | 4150 | 7/3/00 |
| RESPONSE FORMALITY REVIEW | CH/R | 67718 | 7/3/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|--------|
| Final | |
| Original | 3/3/00 |
| 1 ✓ | |
| 2 ✓ | |
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| 15 0 | |
| 16 0 | |
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| 18 ✓ | |
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| 20 0 | |
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If more than 150 claims or 10 actions
staple additional sheet here

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